Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 6863 OF 6994
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
MOVEON.ORG POLITICAL ACTION FEC IDENTIFICATION NUMBER ▼				
100 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				C C00341396
Check if 24-hour report 48-hour report New report Amends report filed on 48-hour report				
Full Name of Payee			Item	Date of Public Distribution/Dissemination
Mailing Address 548 Market Street				10 30 2018 Amount
		1		
City	State	Zip Code		190.22
San Francisco	CA	94104		Transaction ID: SE.29519 Date of Disbursement or Obligation
Purpose of Expenditure Text Messages		Category/ Type		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office	e Sought: X House District: 32
ALLRED, COLIN, , ,		Oppose		President Senate State: TX
Calendar Year-To-Date Per Election for Office Sought	7 1 7	31314.21	Disbu 2018	orsement For:
Full Name of Payee			Item	Date of Public Distribution/Dissemination
·				10 30 / Y Y Y Y Y
Mailing Address 548 Market Street				Amount
City	State	Zip Code		32.60
San Francisco	CA	94104		Transaction ID : SE.29520 Date of Disbursement or Obligation
Purpose of Expenditure Text Messages		Category/ Type		10 30 / 2018
Name of Federal Candidate:		✗ Support	Office	e Sought: K House District: 01
WILLIAMS, VANGIE, , ,		Oppose		President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought	1 1	3724.72	Disbu 2018	orsement For:
(a) SUBTOTAL of Itemized Independent Expenditures				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Matzzie, Tom, , ,	[Electronically Fil	[ed] Date	e 1:	2 06 2018

12

Date